## PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 8, 2004

Application or Docket Number 10/528541

| <u> </u>                 | *  | CL AUG                                    | AC EU ED   | DADTI                                  |                  |                               | _          |                     | <u></u>                |            |                            |                        |
|--------------------------|--|---|--|--|------------------|-------------------------------|------------|---------------------|------------------------|------------|----------------------------|------------------------|
|                          |  | CLAINIS /                                 | (Column 1) (Column 2)  |  |                  |                               |            | SMALL ENTITY TYPE   |                        | OR         | OTHER THAN OR SMALL ENTITY |                        |
| U.S                      | S. NATIONAL  | STAGE FEES                                | . (Solution 1)   |  |                  | Cotalini 2)                   |            | RATE                | FEE                    | 1          | RATE                       | FEE                    |
| BASIC FEE                |  |   | SMALL ENT. = \$ 150  |  | LARG             | SE ENT. = \$ 300              |            | BASIC FEE           |                        | OR         | BASIC FEE                  |                        |
| EXAMINATION FEE          |  |   | Satisfies PCT Article 33(1)-<br>(4) = \$50 / \$ 100                      |  |                  | her situations =              |            | EXAM. FEE           |                        | 1          | EXAM, FEE                  | 3M)                    |
| SEARCH FEE               |  |   | U.S. is ISA = \$ 50 / \$ 100<br>ALL other countries =<br>\$ 200 / \$ 400 |  | All of           | her situations = 250 / \$ 500 |            | SEARCH FEE          |                        |            | SEARCH FEE                 | 300<br>500             |
| FEE FOR EXTRA SPEC. PGS. |  |   | minus 100 =  |  |                  | / 50 ≑                        |            | X \$ 125 =          |                        | 1          | X \$ 250 =                 | Ĭ                      |
| TOTAL CHARGEABLE CLAIMS  |  |   | ) a minus 20 = .   |  |                  |                               |            | X \$ 25 =           |                        | OR         | X \$ 50 =                  |                        |
| סאו                      | EPENDENT CI  | LAIMS                                     | ) minus 3 = .  |  |                  |                               |            | X \$ 100 =          | i                      | OR         | X \$ 200 =                 |                        |
| MUI                      | TIPLE DEPEN  | IDENT CLAIM PR                            | SENT   |  |                  |                               |            | + \$ 180 =          |                        | OR         | + \$ 360 =                 |                        |
| • If                     | the difference   | e in column 1 is                          | ess than zero, enter "0" in column 2                                     |  |                  | lumn 2                        |            | TOTAL               |                        | OR         | TOTAL                      |                        |
| ·                        | CLAIMS AS AMENDED - PART II  (Column 1) (Column 2) (Column 3)  LO / L CLAIMS HIGHEST |   |  |  |                  |                               |            | SMALL ENTITY        |                        | OR         | OTHER THAN<br>SMALL ENTITY |                        |
| AMENDMENT A              | 3/21/05  | REMAINING<br>AFTER<br>AMENDMENT           |  | NUMBE<br>PREVIOU<br>PAID FO            | ER<br>ISLY<br>OR | PRESENT<br>EXTRA              | ŀ          | RATE                | ADDI-<br>TIONAL<br>FEE |            | RATE .                     | ADDI-<br>TIONAL<br>FEE |
|                          | Total  | . 12                                      | Minus  | -20                                    | )                | =                             |            | X \$ 25 =           |                        | OR         | X \$ 50 =                  |                        |
|                          | Independent  | • /                                       | Minus  | <del>~</del> 3                         |                  | = /                           | I          | X \$ 100 =          |                        | OR         | X \$ 200 =                 |                        |
|                          | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM                                       |   |  |  |                  |                               | + \$ 180 = |                     | OR                     | + \$ 360 = |                            |                        |
| •                        | •  |   |  | •                                      |                  |                               |            | TOTAL ADDIT.<br>FEE |                        | OR         | TOTAL ADDIT.<br>FEE        |                        |
|                          | ·  | (Column 1)                                |  | (Column                                | 2)               | (Column 3)                    | _          |                     |                        |            |                            |                        |
| 8                        |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |  | HIGHES<br>NUMBE<br>PREVIOUS<br>PAID FO | R<br>SLY         | PRESENT<br>EXTRA              |            | RATE                | ADDI-<br>TIONAL<br>FEE |            | RATE                       | ADDI-<br>TIONAL<br>FEE |
|                          | Total  | •   | Minus  | **                                     |                  | ±                             | ſ          | X \$ 25 =           |                        | OR         | X \$ 50 =                  |                        |
|                          | Independent  | •   | Minus  | ***                                    |                  | 8                             | Γ          | X \$ 100 =          |                        | OR         | X \$ 200 =                 |                        |
|                          | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM                                       |   |  |  |                  |                               | + \$ 180 = |                     | OR                     | + \$ 360 = |                            |                        |
| <u> </u>                 |  |   |  |  |                  |                               |            | OTAL ADDIT.<br>FEE  |                        | OR         | TOTAL ADDIT.<br>FEE        |                        |
|                          |  |   |  |  |                  |                               |            |                     |                        |            | _                          |                        |
| •                        | If the entry in colu   | ımn 1 is less than the                    | entry in column 2,   | write "0" in o                         | olumn            | 3.                            |            |                     |                        |            |                            |                        |

<sup>\*\*\*</sup> If the "Highest Number Previously Paid For" IN THIS SPACE is less than "3", enter "3".

If the "Highest Number Previously Paid For" IN THIS SPACE is less than "20", enter "20".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.